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JUN 22 2005**Date:** June 22, 2005**No. of Pages:** 14 (including this cover sheet)**Fax No.:** 703.872.9306**PLEASE DELIVER THE FOLLOWING PAGES IMMEDIATELY TO:****Name:** Examiner Frank Tsay**Art Unit:** 3672**From:** John W. Peck, Ph.D.**Re:** Application No. 10/812,157
Filed March 26, 2004
Entitled WASHPIPE ASSEMBLY**File:** 52313/JWP/V186**I HEREBY CERTIFY THAT THIS PAPER IS BEING FACSIMILE TRANSMITTED TO
THE UNITED STATES PATENT AND TRADEMARK OFFICE ON June 22, 2005.***Trudi Thompson***Trudi Thompson*****Correspondence:**

1. AMENDMENT TRANSMITTAL (2 PGS)
2. AMENDMENT (8 PGS)
3. TERMINAL DISCLAIMER TRANSMITTAL (2 PGS)
4. TERMINAL DISCLAIMER (2 PGS)

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
AMENDMENT TRANSMITTAL LETTER

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Trudi Thompson
Trudi Thompson

Applicant : Padmasiri Daya Seneviratne
Application No. : 10/812,157
Filed : March 26, 2004
Title : WASHPIPE ASSEMBLY

Confirmation No. 2954

Grp./Div. : 3672
Examiner : Frank Tsay

Docket No. : 52313/JWP/V186

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Post Office Box 7068
Pasadena, CA 91109-7068
June 22, 2005

Commissioner:

Enclosed is an amendment to the above-identified application.

CLAIMS AS AMENDED						
	Claims Remaining After Amendment	Highest Number Paid For	Number Extra Claims	Small Entity Rate	Large Entity Rate	FEE
Total Claims Fee	28	*20	8	x \$25.00	8 x \$50.00	\$400
Independent Claims	2	** 3	0	0 x \$100.00	0 x \$200.00	0
Multiple Dependent Claims ***				\$180.00	\$360.00	0
TOTAL FILING FEE						\$400
NO ADDITIONAL FEE REQUIRED	IF NO FEE REQUIRED, INSERT "0"					\$400
LIST INDEPENDENT CLAIMS: 35, 49						
* IF HIGHEST NUMBER PREVIOUSLY PAID FOR IS 20 OR LESS, WRITE "20" IN COLUMN 3 ** IF HIGHEST NUMBER PREVIOUSLY PAID FOR IS 3 OR LESS, WRITE "3" IN COLUMN 3 *** PAY THIS FEE ONLY WHEN MULTIPLE DEPENDENT CLAIMS ARE ADDED FOR THE FIRST TIME						

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**Amendment Transmittal Letter
Application No. 10/812,157**

____ Attached is our check for \$ to pay the fees calculated above.
____ A Petition for Extension of Time and the required fee are enclosed.
X Other enclosures: Terminal Disclaimer Transmittal, Terminal Disclaimer

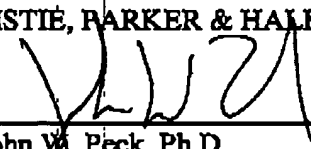
The Commissioner is hereby authorized to charge the additional claim fee of \$400 to Deposit Account No. 03-1728. Please show our docket number with the charge to the Deposit Account.

The Commissioner is further authorized to charge any fees under 37 CFR 1.16 and 1.17 which may be required by or to give effect to this paper to Deposit Account No. 03-1728. Please show our docket number with any charge or credit to our Deposit Account.

Respectfully submitted,

CHRISTIE, PARKER & HALE, LLP

By



John W. Peck, Ph.D.
Reg. No. 44,284
626/793-9900

JWP/tt

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